

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Docket Number

10/533050

CLAIMS AS FILED - PART I

SMALL ENTITY
TYPE ☐

OR
OTHER THAN
SMALL ENTITY

	(Column 1)	(Column 2)
U.S. NATIONAL STAGE FEES		
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =
TOTAL CHARGEABLE CLAIMS	12 minus 20 =	
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

RATE	FEE
BASIC FEE	
EXAM. FEE	
SEARCH FEE	
X \$ 125 =	
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL	

RATE	FEE
BASIC FEE	300
EXAM. FEE	200
SEARCH FEE	500
X \$ 250 =	
X \$ 50 =	
X \$ 200 =	200
+ \$ 360 =	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

4/28/5

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OR
OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X \$ 50 =	
X \$ 200 =	
+ \$ 360 =	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X \$ 50 =	
X \$ 200 =	
+ \$ 360 =	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

United States Patent and Trademark Office
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I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.



Helene Isobel

Date: March 3, 2006

MAIL STOP AMENDMENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:
Frederick H. Hausheer

Conf. No.: 3276

: Group Art Unit: 1614

Appln. No.: 10/002,526

: Examiner: Phyllis G. Spivack

Filing Date: October 26, 2001

: Attorney Docket No.: 066131-30US
(X-0211)

Title: METHOD FOR TREATING PATIENTS FOR RADIATION EXPOSURE

AMENDMENT TRANSMITTAL LETTER

Transmitted herewith is an Amendment in the above-identified application.

☐ Substitute Specification.

☒ Small Entity status:

☒ has previously been claimed/established.

☐ is hereby claimed under 37 C.F.R. §1.27, as ☐ an Independent Inventor, or ☐ a Small Business Concern, or ☐ a Non-Profit Organization.

☒ A Petition for Extension to Time (1 month) is enclosed, along with the payment for the extension fee (\$60.00)

The additional claim fees have been calculated as follows:

					SMALL ENTITY		LARGE ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	24	(-)	20	4	x25	100.00	x50	
INDEP.	5	(-)	6	0	x100	0	x200	
<input type="checkbox"/> 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					+\$180	0	+\$360	
					TOTAL	\$100.00	TOTAL	

The additional claim fees and extension of time fee are being paid by:

- ☒ [X] A check in the amount of \$160.00.
- ☒ [X] Authorization to charge and/or credit Deposit Account No. 50-1017 (Billing No. 066131.0030) as noted below. A duplicate copy of this sheet is enclosed.
- ☒ [X] Any overpayments or deficiencies in the above-calculated fee.
- ☐ [] Additional claim fee in the amount of \$____.00 as calculated above.
- ☒ [X] Any additional fees required under 37 C.F.R. § 1.16 and/or § 1.17.
- ☒ [X] In the event that a Petition for Extension of Time is required, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account.

CORRESPONDENCE ADDRESS

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